Affidavit to Accompany

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District Court	No. 10362
Appeal No	05-2233
united Sta	ites

Fabian Ruiz

Defendant - Appellant

Affidavit in Support of Motion

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to

redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct.(28 U.S.C. § 1746; 18 U.S.C. § 1621.)

My issues on appeal are:

Complete all questions in this application and then

Instructions

sign it. Do not leave any blanks: if the answer to a

question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a

separate sheet of paper identified with your name, your case's docket number, and the question number. Date: 9-15-05

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise. Income source

Average monthly amount during Amount expected next month the past 12 months

Employment Self-employment

Income from real property (such as rental income) Interest and dividends

Case 1:03-cr-10362-WC	Average monthly Syne payed a ment	_	Amount expects 10/10/2005	ed next month Page 2 of 6
Gifts	You \$	Spouse \$_NA	You \$	Spouse \$_N A
Alimony	s	S NA	\$	SNA
Child support	\$ <u> </u>	s NA	S	SNA
Retirement (such as social security, pensions, annuities insurance	, <u>s</u>	S_NA	\$	s_NIA_
Disability (such as social security, insurance payment	\$ <u> </u>	SNA	\$	s NA
Unemployment payments	\$	SNA	\$ <u> </u>	SNA
Public-assistance (such as welfare)	\$	s_N A	\$ <u> </u>	SNA
Other (specify):	\$ <u> </u>	SNA	so	s_NA
Total Monthly income:	\$ <u></u>	SNA	<u>\$</u>	S NA
11	tory, most recent en Idress	Dates of Emplo	os monthly pay is b Dyment Gross i 4-200 3	
3. List your spouses's employtaxes or other deductions) Employer Ad	yment history, most dress	Dates of Emplo	yment Gross n	ly pay is before

	money you o	Document 235 or your spouse have	5-2 Filed in bank accor	 d 10/10/2005 P unts or in any other	age 3 of 6
institution.					
		e of Account	Amount you		our spouse ha
Wellstergo	_ Che	iking	S tellin	5.01 s_	NA
-		3	\$	_ \$	NA
			s		NIA
If you are a prisone officer showing all institutional account multiple institution	receipts, exp nts. If you h	penditures, and ba nave multiple acco	lances durii unts, perhap	ng the last six mon os because you hav	ths in your
5. List the assets, and household furnishings	their values,	which you or your sp	oouse owns. 1	Do not list clothing an	nd ordinary
Home	(Value)	Other real estate	(Value)	Motor Vehicle #1	(Value)
		11-110			,
		-		100 Section 100 Se	
Motor Vehicle #2	(Value)	Other assets	(Value)	Other assets	(Value)
Make & year: Nor	1e	None		None	
Model:					
Registration#:					
(5, .				Ouse money and the	
6. State every person, Person owing you of spouse money	r your	Amount owed to ye	ou	Amount owed to y	our spouse

8. Estimate the average monthly expenses of you and your factors of yo		
Rent or home mortgage payment (include lot rented for mobile home) Are any real estate taxes included? Yes \(\simega \) No Is property insurance included? \(\simega \) Yes \(\simega \) No?	You \$	Spouse \$_W\A_
Utilities (electricity, heating fuel, water, sewer, and Telephone)	\$ <u>O</u>	s_N(A_
Home maintenance (repairs and upkeep)	\$	SNIA
Food	\$	SNA
Clothing	\$	SNA
Laundry and dry-cleaning	\$	SNA
Medical and dental expenses	\$	SNA
Transportation (not including motor vehicle payments)	\$6	SNA
Recreation, entertainment, newspapers, magazines, etc.	\$	\$ N/A
Insurance (not deducted from wages or included in Mortgage payments)	\$	\$ N/A
Homeowner's or renter's	\$	SNA
Life	\$	SNA
Health	\$6	SNA
Motor Vehicle	\$	s_N/A
Other:	\$	SNA
Taxes (not deducted from wages or included in Mortgage payments)(specify):	\$	s NA
Installment payments	\$	SNA
Motor Vehicle	\$	SNA
Credit card (name):	\$	s N/A
Department store (name):	\$ O	SNA
Other:	\$	s N/A
	-	4

Alimony, maintenance, and support paid to others	\$	\$ NIA
Case 1:03-cr-10362-WGY Document 235-2 Regular expenses for operations of business, profession, or farm (attach detailed statement)	Filed 10/10/200	95 Page 5 of 6
Other (specify):	\$	s NA
Total monthly expenses:	\$ 100000	\$ 14 A
9. Do you expect any major changes to your monthly income during the next 12 months? □ Yes □ No If yes, describe on an		ssets or liabilities
10. Have you paid — or will you be paying — an attorney ar case, including the completion of this form? ☐ Yes ☐ No	ny money for services	in connection with thi
If yes, how much? \$ 30,000		
If yes, state the attorney's name, address, and telephone number of the state of th	than an attorney (such	n as a paralegal or a n of this form?
If yes, how much? \$		
If yes, state the person's name, address, and telephone numbe	r:	
72 B		
12.Provide any other information that will help explain why y appeal.	ou cannot pay the do	cket fees for your

13.State the address of your legal residence.	
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Tusson Arizona 85714	
Your daytime phone number: () NONE	
Your age:	
ω	
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